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36183 75	90 03/03/2005	any change of address)	Fee(s) Transmittal, Th	f mailing can only be used in his certificate cannot be used all paper, such as an assignm te of mailing or transmission.	for any other accompanying
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			005 Helen Lyn		(Depositor's name)
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	Ō DA	W.	may 23	, 2005	(Date)
APPLICATION NO.	FILING DATE	FIRSTADIA	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/978,454	10/15/2001	Mark D). Erion	030727.0027.CON1	5123
TITLE OF INVENTION: NO	OVEL PRODRUGS FOR P	HOSPHORUS-CONTAINING	COMPOUNDS	•	. •
APPLN. TYPE	SMALL ENTITY	' ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	06/03/2005
EXAM	INER	. ART UNIT	CLASS-SUBCLASS		
JONES, DAME	RON LEVEST	1616	424-001730		
CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. Change of correspondence Address (or Change of Correspondence Address (2) the names of up to 3 registered patent attorneys or agents (As a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Correspondence Address (I) the names of up to 3 registered patent attorneys or agents (As a member a registered patent attorneys or agents. If no name is listed, no name will be printed. Correspondence Address (I) the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. Correspondence Address (I) the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. Correspondence Address (I) the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. Correspondence Address (I) the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. Correspondence Address (I) the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. Correspondence Address (I) the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. Correspondence Address (I) the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed. Correspondence Address (I) the names of up to 3 registered patent attorneys or agents. If no name is listed, no name will be printed.					
recordation as set forth in (A) NAME OF ASSIGNE			for filing an assignment. CE: (CITY and STATE OR CO		
Metabasis T	herapeutics, I	nc. S	San Diego, Calife	ornia	
Please check the appropriate	assignee category or catego	ries (will not be printed on the p	patent): 🗖 Individual 🗖 🤇	Corporation or other private gr	oup entity Government
4a. The following fee(s) are e	enclosed:	4b. Payment of	Fee(s):		
Issue Fee A check in the amount of the fee(s) is enclosed.					
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Advance Order - # of	Copies 1611	Deposit Acc	count Number $50-2613$	charge the required fee(s), or (enclose an extra	copy of this form).
5. Change in Entity Status (a. Applicant claims SN	from status indicated above MALL ENTITY status. See		cant is no longer claiming SMA	ALL ENTITY status. See 37 C	CFR 1.27(g)(2).
The Director of the USPTO i NOTE: The Issue Fee and Pu interest as shown by the reco	iblication Fee (if required) v	be Fee and Publication Fee (if ar will not be accepted from anyone ent and Trademark Office.	ny) or to re-apply any previous e other than the applicant; a reg	sly paid issue fee to the applic gistered attorney or agent; or t	ation identified above. he assignee or other party in.
Authorized Signature	Margh C	moh	Date	5/23/05	
Typed or printed name	Diana L. Bush,	Ph.D., Esq.	Registration	n No. <u>51, 109</u>	
an application. Confidentialit submitting the completed ap- this form and/or suggestions Box 1450, Alexandria, Virgii Alexandria, Virginia 22313-1	ty is governed by 35 U.S.C. plication form to the USPT for reducing this burden, sh nia 22313-1450. DO NOT 1450.	11. The information is required 122 and 37 CFR 1.14. This col O. Time will vary depending upould be sent to the Chief Inform SEND FEES OR COMPLETEL are required to respond to a col	llection is estimated to take 12 pon the individual case. Any c mation Officer, U.S. Patent and DFORMS TO THIS ADDRES	minutes to complete, includi comments on the amount of to I Trademark Office, U.S. Dep S. SEND TO: Commissioner	ng gathering, preparing, and ime you require to complete oartment of Commerce, P.O. for Patents, P.O. Box 1450,